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UTILITY PATENT APPLICATION **TRANSMITTAL**

Attorney Docket No.	
First Inventor	(MAZ) VITUAZ
Title	

Continuation Divisional Continuation-in-part (CIP) of pnor application No	(Unity for new nonprovisional applications under 37 CFR	1.53(b)) Express Mail Label No.		
See MFEP chapter 600 concerning utility patent application contents Washington, DC 20231		IADDRESS TO: Box Patent Application		
Computer Program (Appendix)		Darri dioner ppinoation		
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 163(d)(2) and 1 33(b) 6. Application Data Sheet. See 37 CFR 1.76 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of prior application No	1. Applicant claims small entity status. See 37 CFR 1.27 3. Applicant claims small entity status. See 37 CFR 1.27 3. Description [Total Pages (preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. Drawing(s) (35 U.S.C. 113) [Total Sheets] 5. Oath or Declaration [Total Pages] a. Newly executed (original or copy) Copy from a prior application (37 CFR 1.63 (for continuation/divisional with Box 18 comp	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. Assignment Papers (cover sheet & document(s)) 10. 37 CFR 3.73(b) Statement Power of (when there is an assignee) Attorney 11. English Translation Document (if applicable) 12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 13. Preliminary Amendment 14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)		
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of pnor application No	i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1 63(d)(2) and 1 33(b) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.			
The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS 19. Correspondence address below Customer Number or Bar Code Label Transport Country Name SANJIX (SAM) K. AGARWAL Address 1300 CHESTERTON DRIVE City RICHARDSON State TX Zip Code 75080 Country V.S.A Telephone 972-907-1451 Fax 972-907-134 Name (Print/Type) SANJIV (SAM) AGARWAL Registration No. (Attorney/Agent) Signature Date 4-7-2801	18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) Of pnor application No Prior application information Examiner Group Art Unit:			
Customer Number or Bar Code Label (Insert Customer Not or Attach bar code label Pers) Name SANJIX (SAMI) K. AGARWAL Address 1300 CHESTERTON DRIVE City RICHARDSON State TX Zip Code 75080 Country U.S.A Telephone 972-907-1451 Fax 972-907-1 Name (Print/Type) SANJIV (SAM) AGARWAL Registration No. (Attorney/Agent) Signature Date 4-7-2001	The incorporation can only be relied upon when a portion has been	ng continuation or divisional application and is hereby incorporated by reference. en inadvertently omitted from the submitted application parts.		
Name SANJIX (SAM) K. AGARWAL Address 1300 CHESTERTON DRIVE City RICHARDSON State TX Zip Code 75080 Country U.S.A Telephone 972-907-1451 Fax 972-907-1 Name (Print/Type) SANJIV (SAM) AGARWAL Registration No. (Attorney/Agent) Signature Date 4-7-2001	19. CORRESPONDENCE ADDRESS			
Address 1300 CHESTERTON DRIVE City RICHARDSON State TX Zip Code 75080 Country U.S.A Telephone 972-907-1451 Fax 972-907-1 Name (Print/Type) SANJIV (SAM) AGARWAL Registration No. (Attorney/Agent) Signature Date 4-7-2001	Customer Number or Bar Code Label [Insert Customer No. or Attach ber code label Fiere] Or Correspondence address below			
City RICHARDSON State TX Zip Code 75080 Country U.S.A Telephone G72-907-1451 Fax G72-907-1 Name (Print/Type) SANJIV(SAM) AGARWAL Registration No. (Attorney/Agent) Signature Date 4-7-2001	Name SANJIX (SA	AM) K. AGARWAL		
City RICHARDSON State TX Zip Code 75080 Country U.S.A Telephone 972-907-1451 Fax 972-907-1 Name (Print/Type) SANJIV(SAM) AGARWAL Registration No. (Attorney/Agent) Signature Date 4-7-2001	Address 1300 CHES	TERTON DRIVE		
Name (Print/Type) SANJIV (SAM) ACARWAL Registration No. (Attorney/Agent) Signature Date 4-7-201				
Name (Print/Type) SANJIV (SAM) ACARWAL Registration No. (Attorney/Agent) Signature Date 4-7-2001		7,000		
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FEE TRANSMITTAL for FY 2001

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TOTAL AMOUNT OF PAYMENT

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Complete if Known				
Application Number				
Filing Date				
First Named Inventor	VITUAS	(SAM)		
Examiner Name				
Group Art Unit				
Attorney Docket No.				

METHOD OF PAYMENT		FEE CALCULATION (continued)			
The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to	3. ADI	DITIC			*************************************
Deposit		Large		mall	
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Account Name	105 1	30 2	05 65	Surcharge - late filing fee or oath	
Charge Any Additional Fee Required Under 37 CFR 1 16 and 1 17	127	50 2	27 25	Surcharge - late provisional filing fee or cover sheet	
Applicant claims small entity status See 37 CFR 1.27	139 1	30 1	39 130	Non-English specification	
2. Payment Enclosed:	147 2,5	520 1	47 2,520	D For filing a request for ex parte reexamination	
Check Credit card Money Other	112 92	20* 1	112 920	Requesting publication of SIR prior to Examiner action	
FEE CALCULATION	113 1,8	340* 1	13 1,84	0* Requesting publication of SIR after Examiner action	
1. BASIC FILING FEE	115 1 ⁻	10 2	15 55	Extension for reply within first month	
Large Entity Small Entity Fee Fee Fee Fee Description	116 39	90 2	16 195	Extension for reply within second month	
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	117 89	90 2	17 445	Extension for reply within third month	
101 710 201 355 Utility filing fee 355	118 1,3	90 21	18 695	Extension for reply within fourth month	
106 320 206 160 Design filling fee	128 1,8	90 22	8 945	Extension for reply within fifth month	
107 490 207 245 Plant filing fee	119 31	10 21	9 155	Notice of Appeal	
108 710 208 355 Reissue filing fee	120 31	10 22	0 155	Filing a brief in support of an appeal	
114 150 214 75 Provisional filing fee	121 27	70 22	1 135	Request for oral hearing	
SUBTOTAL (1) (\$) 355	138 1,5	10 13	88 1,510	Petition to institute a public use proceeding	
2. EXTRA CLAIM FEES	140 11	10 24	0 55	Petition to revive - unavoidable	
Fee from	141 1,24	40 24	1 620	Petition to revive - unintentional	
Total Claims				Utility issue fee (or reissue)	
Independent 3** - 5	143 44		3 220	Design issue fee	
Claims = = = = = = = = = = = = = = = = = = =	144 60			Plant issue fee	
	122 13	10 12	2 130	Petitions to the Commissioner	
Large Entity Small Entity	123 5	50 12	3 50	Processing fee under 37 CFR 1.17(q)	
Fee Fee Fee Fee Description	126 18	0 12	6 180	Submission of Information Disclosure Stmt	
Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20	581 4	0 58	1 40	Recording each patent assignment per property (times number of properties)	
102 80 202 40 Independent claims in excess of 3	146 71	0 24	6 355	Filing a submission after final rejection	i I
104 270 204 135 Multiple dependent claim, if not paid	140 74			(37 ČFR § 1 129(a))	
109 80 209 40 ** Reissue independent claims over original patent	149 71	0 24	9 355	For each additional invention to be examined (37 CFR § 1.129(b))	
110 18 210 9 ** Reissue claims in excess of 20		0 27	9 355	Request for Continued Examination (RCE)	
and over original patent		0 169	900	Request for expedited examination	
SUBTOTAL (2) (\$)		(speci	fy)	of a design application	
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**or number previously paid, if greater; For Reissues, see above	*Reduced	by Ba	sic Filing	Fee Paid SUBTOTAL (3)	

SUBMITTED BY		Complete (if applicable)
Name (Print/Type)	SANJIV (SAM) AGARWAL Registration No.	Telephone	0700 - 115
Signature	- (I Marcul	Date	11-7-2021
		Date	W-J-200

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